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1st Session
HOUSE OF REPRESENTATIVES
REPORT
104–157

MEDICARE SELECT POLICIES

JUNE 22, 1995.—Ordered to be printed

Mr. BLILEY, from the committee on conference, submitted the following

CONFERENCE REPORT

[To accompany H.R. 483]

The committee of conference on the disagreeing votes of the two Houses on the amendment of the Senate to the bill (H.R. 483), to amend title XVIII of the Social Security Act to permit medicare select policies to be offered in all States, and for other purposes, having met, after full and free conference, have agreed to recommend and do recommend to their respective Houses as follows:

That the House recede from its disagreement to the amendment of the Senate and agree to the same with an amendment as follows:

In lieu of the matter proposed to be inserted by the Senate amendment, insert the following:

SECTION 1. PERMITTING MEDICARE SELECT POLICIES TO BE OFFERED IN ALL STATES FOR AN EXTENDED PERIOD.

Section 4358(c) of the Omnibus Budget Reconciliation Act of 1990, as amended by section 172(a) of the Social Security Act Amendments of 1994, is amended to read as follows:

"(c) EFFECTIVE DATE.—(1) The amendments made by this section shall only apply—

"(A) in 15 States (as determined by the Secretary of Health and Human Services) and such other States as elect such amendments to apply to them, and

"(B) subject to paragraph (2), during the 6½-year period beginning with 1992.

For purposes of this paragraph, the term 'State' has the meaning given such term by section 210(h) of the Social Security Act (42 U.S.C. 410(h)).

"(2)(A) The Secretary of Health and Human Services shall conduct a study that compares the health care costs, quality of care, and access to services under medicare select policies with that under

other medicare supplemental policies. The study shall be based on surveys of appropriate age-adjusted sample populations. The study shall be completed by June 30, 1997.

"(B) Not later than December 31, 1997, the Secretary shall determine, based on the results of the study under subparagraph (A), if any of the following findings are true:

"(i) The amendments made by this section have not resulted in savings of premium costs to those enrolled in medicare select policies (in comparison to their enrollment in medicare supplemental policies that are not medicare select policies and that provide comparable coverage).

"(ii) There have been significant additional expenditures under the medicare program as a result of such amendments.

"(iii) Access to and quality of care has been significantly diminished as a result of such amendments.

"(C) The amendments made by this section shall remain in effect beyond the 6½-year period described in paragraph (1)(B) unless the Secretary determines that any of the findings described in clause (i), (ii), or (iii) of subparagraph (B) are true.

"(3) The Comptroller General shall conduct a study to determine the extent to which individuals who are continuously covered under a medicare supplemental policy are subject to medical underwriting if they change the policy under which they are covered, and to identify options, if necessary, for modifying the medicare supplemental insurance market to make sure that continuously insured beneficiaries are able to switch plans without medical underwriting. By not later than June 30, 1996, the Comptroller General shall submit to the Congress a report on the study. The report shall include a description of the potential impact on the cost and availability of medicare supplemental policies of each option identified in the study.".

And the Senate agree to the same.

TOM BLILEY,
MICHAEL BILIRAKIS,
DENNIS HASTERT,
BILL ARCHER,
WILLIAM THOMAS,
NANCY L. JOHNSON,
Managers on the Part of the House.

BOB PACKWOOD,
BOB DOLE,
DANIEL PATRICK MOYNIHAN,
Managers on the Part of the Senate.

JOINT EXPLANATORY STATEMENT OF THE COMMITTEE OF CONFERENCE

The managers on the part of the House and the Senate at the conference on the disagreeing votes of the two Houses on the amendment of the Senate to the bill (H.R. 483) to amend title XVIII of the Social Security Act to permit Medicare select policies to be offered in all States, and for other purposes, submit the following joint statement to the House and the Senate in explanation of the effect of the action agreed upon by the managers and recommended in the accompanying conference report:

The Senate amendment struck all of the House bill after the enacting clause and inserted a substitute text.

The House recedes from its disagreement to the amendment of the Senate with an amendment that is a substitute for the House bill and the Senate amendment. The differences between the House bill, the Senate amendment, and the substitute agreed to in conference are noted below, except for clerical corrections, conforming changes made necessary by agreements reached by the conferees, and minor drafting and clerical changes.

Extend Medicare Select to All States for Three Years

PRESENT LAW

The Omnibus Reconciliation Act of 1990 (P.L. 101–508) established a demonstration project called Medicare Select under which insurers can market Medicare supplemental policies (called "Medigap" policies) that are the same as other Medigap policies except that supplemental benefits are paid only if services are provided through designated providers. The demonstration was limited to 15 states and expired December 31, 1994. The demonstration was extended to June 30, 1995, in the Social Security Act Amendments of 1994 (P.L. 103–432).

HOUSE BILL

Medicare Select authority is extended to all states which wish to participate until June 30, 2000. The Secretary of Health and Human Services is to conduct a study of Medicare Select prior to 1998 to study cost, quality and access for Medicare Select compared to other Medigap policies. Medicare Select remains in effect unless the Secretary finds that Medicare Select has: (1) not resulted in savings of premium costs to beneficiaries compared to non-select Medigap policies; (2) resulted in significant additional expenditures for the Medicare program; or (3) resulted in diminished access and quality of care.

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SENATE AMENDMENT

Same as the House bill except the extension is until December 31, 1996. The Secretary is to complete the study by June 30, 1996. The General Accounting Office (GAO) is to conduct a study on Medigap insurance and report to Congress by June 10, 1996. The report is to include: (1) an analysis of whether there are problems in the current Medigap system for beneficiaries who wish to switch Medigap policies without medical underwriting or pre-existing condition exclusions; (2) options for modifying the Medigap market to address any problems identified; and (3) an analysis of the impact of each option on the cost and availability of Medigap insurance, with particular reference to problems with Medicare Select policies.

CONFERENCE AGREEMENT

The conference agreement adopts the Senate amendment with the following changes: (1) Medicare Select is extended to all States for three years (until June 30, 1998); and (2) the GAO study is clarified to require analysis of all types of Medigap insurance by removing specific reference to Medicare Select. Reference to pre-existing condition exclusions is also removed as they are already prohibited under current law for Medigap replacement policies.

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